"Oral Health for All"



March 4, 2014

Program Review and Investigations Committee Testimony

Raised Bill No. 5378: AN ACT IMPLEMENTING THE RECOMMENDATIONS OF THE LEGISLATIVE PROGRAM REVIEW AND INVESTIGATIONS COMMITTEE CONCERNING MEDICAID-FUNDED EMERGENCY DEPARTMENT VISITS.

Senator Kissel, Representative Mushinsky and other distinguished members of the Human Services Committee,

I want to thank you for this opportunity to address H.B. 5137. I am Mary Moran Boudreau, testifying today on behalf of the Connecticut Oral Health Initiative, the only oral health advocacy organization in Connecticut with a vision of "Oral Health for All." I am a resident of Windsor.

We are asking you to support Raised Bill No. 5378, An Act Implementing the Recommendations of the Legislative Program Review and Investigations Committee concerning Medicaid-Funded Emergency Department Visits. The proposed changes to Medicaid enrollment addresses the issue of lost coverage due to changes in circumstances, such as income and family size.

Connecticut has seen an increase of the utilization of dental care for Medicaid children from 46% to almost 70% since 2007. According to the 2012 CT DPH report, Every Smile Counts, The Oral Health of Connecticut's Children¹, Children in 13% of children in kindergarten have untreated decay, a slight improvement from 2006-2007 at 16%. More significantly, 12% of children in third grade have untreated decay, a significant improvement from 2006-2007 (18%). Some of this can be attributed to the improved Medicaid administration and increased reimbursement rates that occurred in 2008.

Improvements will be greater if "continuous eligibility" is instituted that will provide stabilized enrollment by providing twelve-months of coverage regardless of changes in family circumstances. Continuous coverage demonstrates an increase in participants receiving preventive care which produces better health outcomes as well lower costs.

Presently, there are numerous persons not receiving Medicaid coverage resulting in them not receiving health care they need. This includes dental care, both preventive and restorative, that may have larger ramifications for their overall health and increase costs associated with that.

Just this past week at the Oral Health Day in the Capitol and Legislative Office Building, one of our table participants heard from a woman who was there with the Girl Scouts who saw our flyer on Medicaid and continuous eligibility. She asked if this would affect her in continuing to gain dental treatment, as her family lost coverage at the end of last year, when she found a job that ended up lasting for only 3 months. She had been told she had decay but she could not afford dental services. When her re-application is processed and she does get Medicaid again, there is the chance that she may need more expensive services and may experience pain due to the

delay in services. I use this case to illustrate the need and for continuous eligibility, as a path the wellness for children and adults and to save money in the Medicaid system.

Please adopt "continuous eligibility" this year for children and seek federal approval for continuous eligibility of one year for adults who have been determined eligible for the Medicaid program.

If I can be of any assistance, please call me. Thank you for your time and your commitment to the health and oral health of all Connecticut citizens especially those who are the needlest.

I urge your support of H. B. 5378.

May moran Boudreau

Thank you for your attention to this important issue and your commitment to the health and oral health of Connecticut residents.

Sincerely,

Mary Moran Boudreau Executive Director

1 Connecticut Department of Public Health, Office of Oral Health. Every Smile Counts, The Oral Health of Connecticut's Children, Hartford, Connecticut, October 2012. http://www.ct.gov/dph/lib/dph/oral_health/pdf/oral_health_ct_2012_rev.pdf